



Daily Service Delivery Record

Client Name																		Vendor No.																		Month and Year													
TASK(S) ASSIGNED	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	COMMENTS																	
Bathing																																																	
Dressing																																																	
Exercising																																																	
Feeding																																																	
Grooming																																																	
Hair/Skin Care																																																	
Toileting																																																	
Transfer/Ambulation																																																	
Cleaning																																																	
Laundry																																																	
Escort																																																	
Shopping																																																	
Transportation																																																	
1. 24-hr. supervision																																																	
2. 24-hr. supervision																																																	
3. 24-hr. supervision																																																	
Other (specify):																																																	
Other (specify):																																																	
Other (specify):																																																	
Other (specify):																																																	
Other (specify):																																																	

This is to certify that this is a correct daily service delivery record for DADS clients. _____
Signature—Supervisor/Manager _____ Date _____